



Iowa Department of Human Services

Iowa Medicaid Electronic
Health Record (EHR)
Incentive Program
Environmental Scan Summary

June 24, 2016

Objective of Study

- State of health IT engagement
- EHR Incentive Programs participation
- EHR vendor/version/certified edition
- Institutionalization of EHR and EHR capabilities within the organization
- Usage of health information exchange
- Level of interoperability and capabilities
- Event notifications and use within organization and/or between organizations
- Practice in social services referrals, Health Risk Assessment, and Health Home

Sampling Frame

(data results as of Spring 2015)

All Iowa Providers and Hospitals who are enrolled in Medicaid and have received at least one EHR incentive payment from either the Medicare or Medicaid EHR Incentive Programs

Sampling Frame - EPs

- 15,113 Active Medicaid enrolled EPs located in Iowa
- 5,024 EPs in Iowa have been paid an EHR incentive
- **30% Active Medicaid EPs in Iowa have received an EHR incentive payment**
- 4,330 Active Medicaid enrolled organizations located in Iowa
- 1,675 active Medicaid enrolled organizations received at least one EHR incentive payment
- **39% of All active Medicaid enrolled organizations have received at least one EHR incentive payment**
- **Note:** The data was reduced from the individual EP to the organization and primary contact levels

Sampling Frame - Hospitals

- 117 Iowa hospitals have received an EHR incentive payment
- 100% EHR incentive program participation

Surveys

- 3 surveys were administered to EPs/EHs enrolled in Medicaid who have received at least one EHR incentive payment
 - Hospital (Acute Care, Critical Access)
 - EPs (excluding dentists)
 - Medicaid type EPs: Physicians, Certified Nurse Midwives, Physician Assistants practicing in FQHC/RHC led by a PA, Nurse Practitioner
 - Medicare type EPs: Doctor of medicine or osteopathy, Doctor of dental surgery or dental medicine, Doctor of podiatry, Doctor of optometry, Chiropractor
 - Dentists

Survey Responses

- 43.2% hospitals
- 27.1% practices
- 20.3% dental practices

Table 2.1 Sample Size and Response Rate

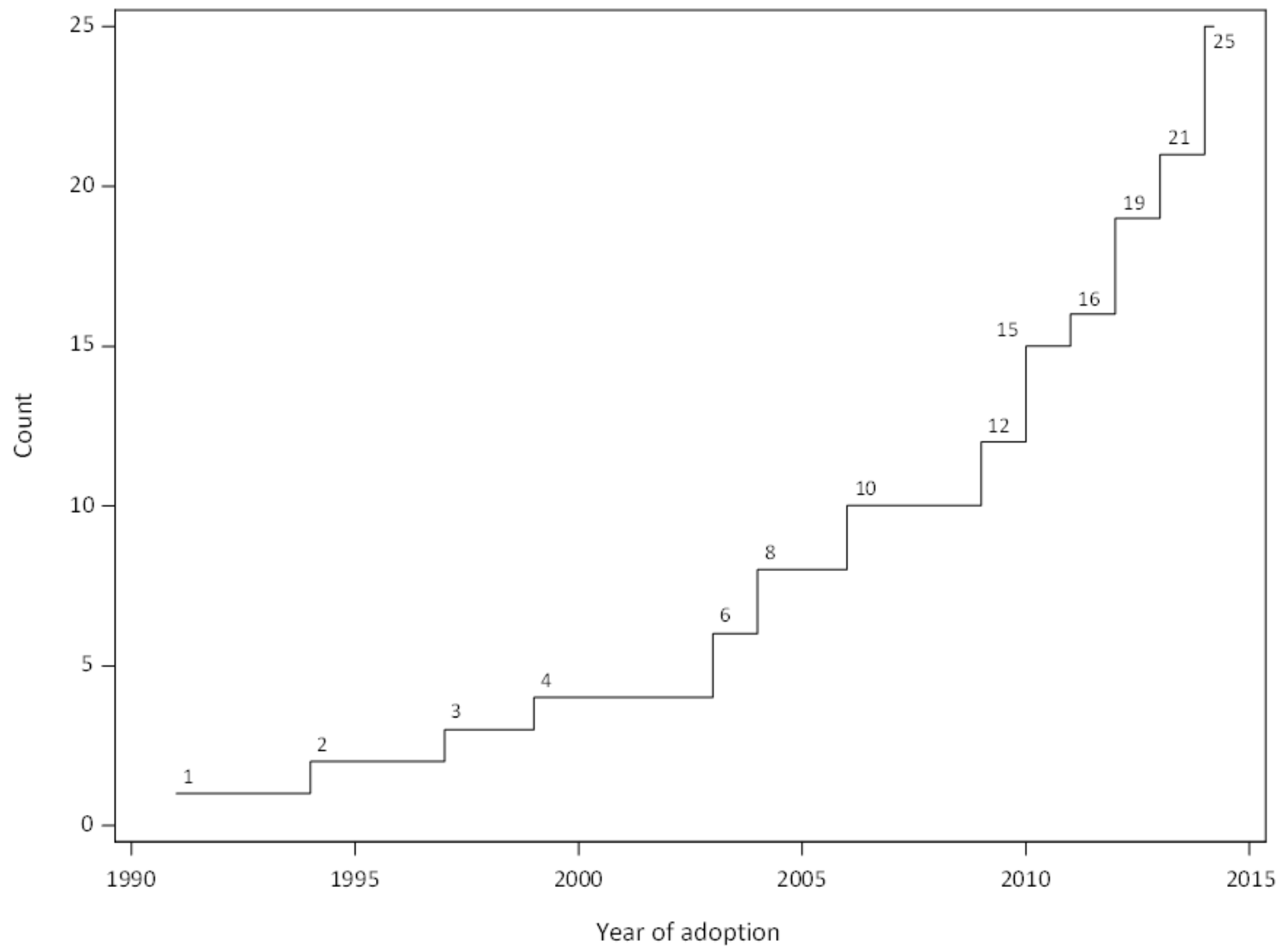
| | <u>Sample Size</u> | <u>Response</u> | <u>Raw Response Rate</u> | <u>Effective Response</u> | <u>Effective Response Rate</u> |
|------------------------|------------------------|-----------------|----------------------------------|-------------------------------|--|
| Hospital Survey | 95 | 41 | 43.2% | 35 | 36.8% |
| Practice Survey | 876 | 237 | 27.1% | 204 | 23.3% |
| Dental Practice Survey | 59 | 12 | 20.3% | 10 | 16.9% |

FINDINGS

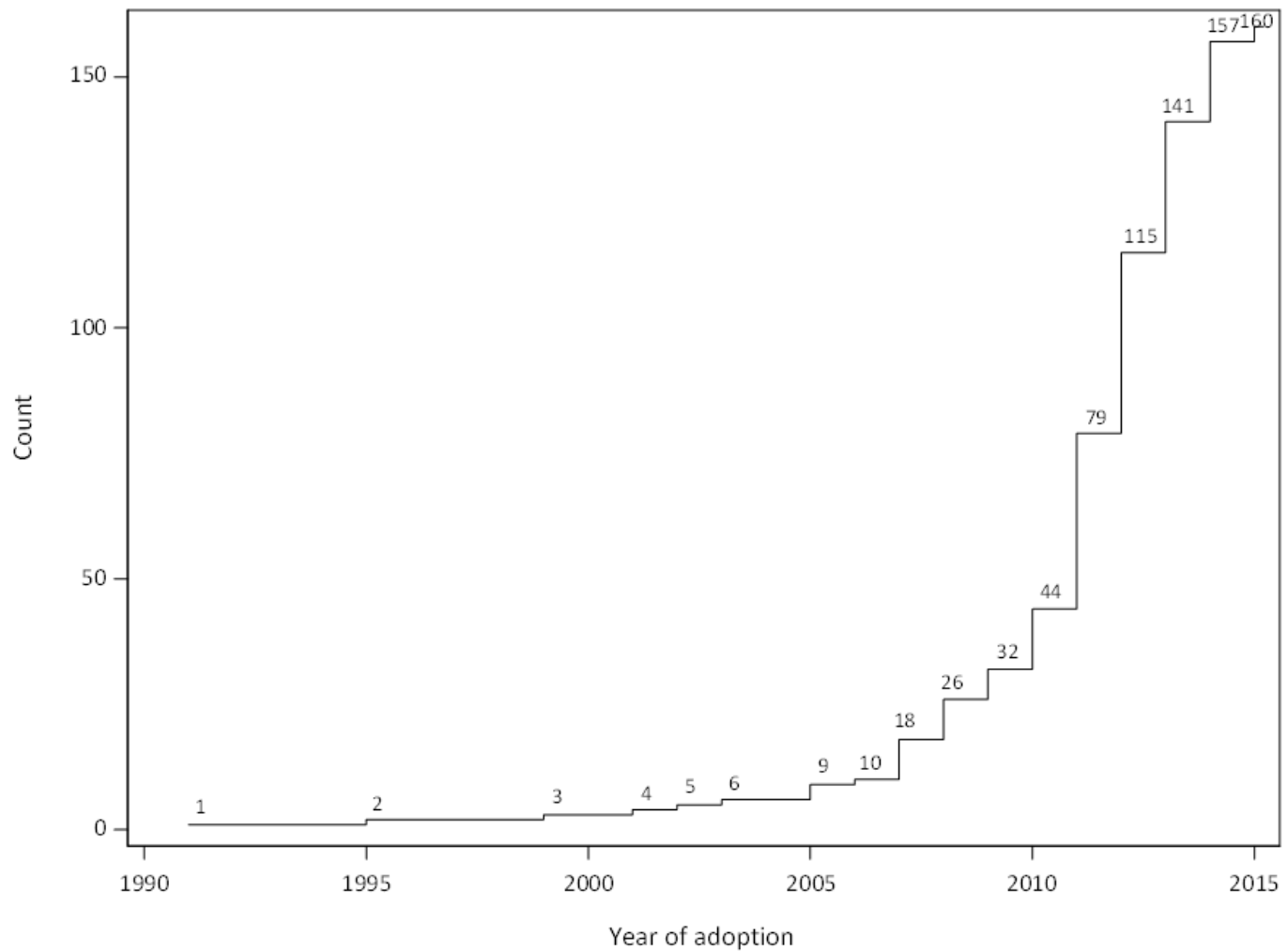
EHR Adoption Increase

- EHR adoption has accelerated, since 2010 adoption of primary EHRs is as follows
 - 52% of hospitals
 - 80% of practices
 - 78% of dental practices
- Question: Which year did your organization first adopt the primary EHR system?

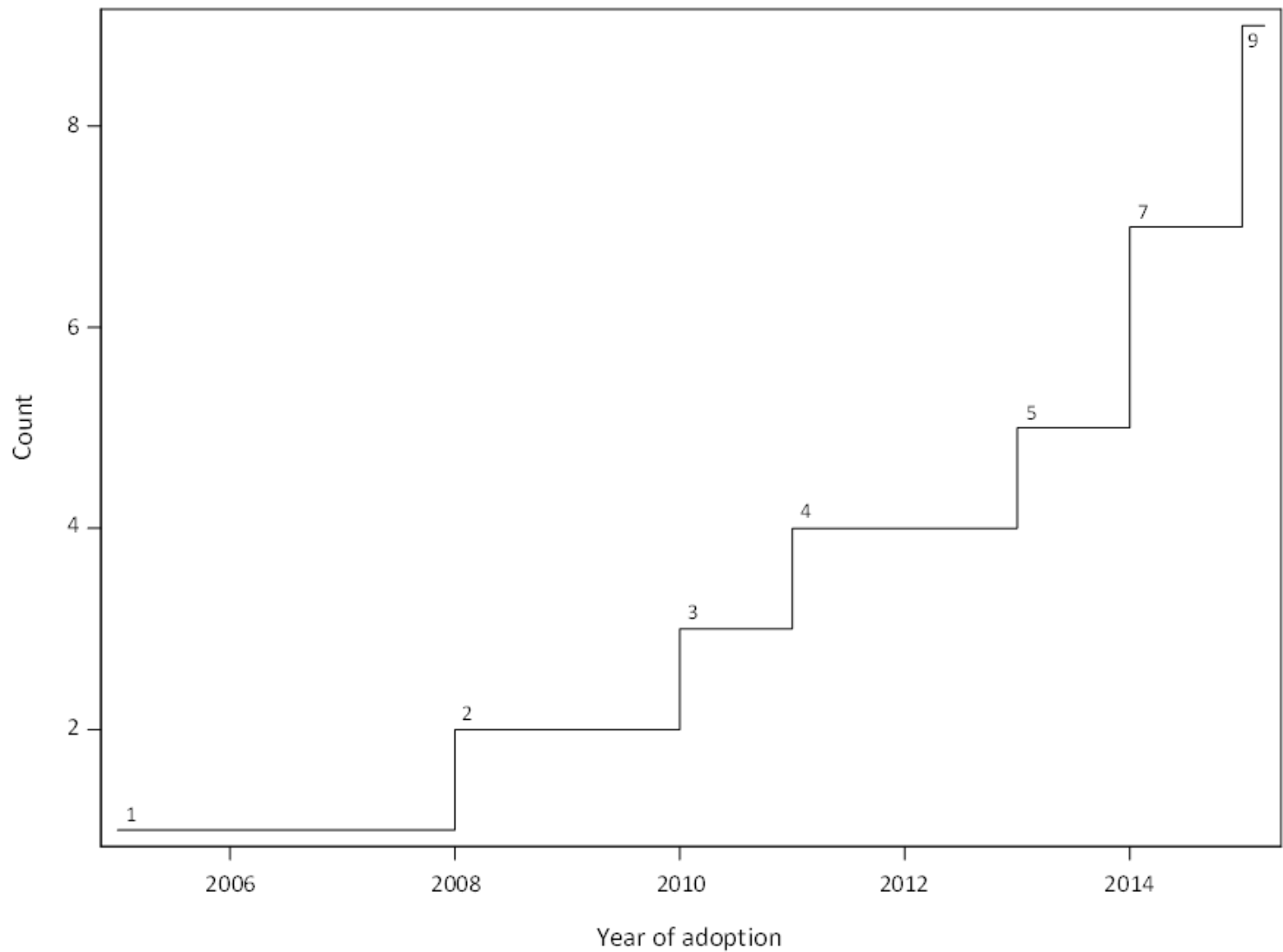
EHR Adoption Increase - Hospital



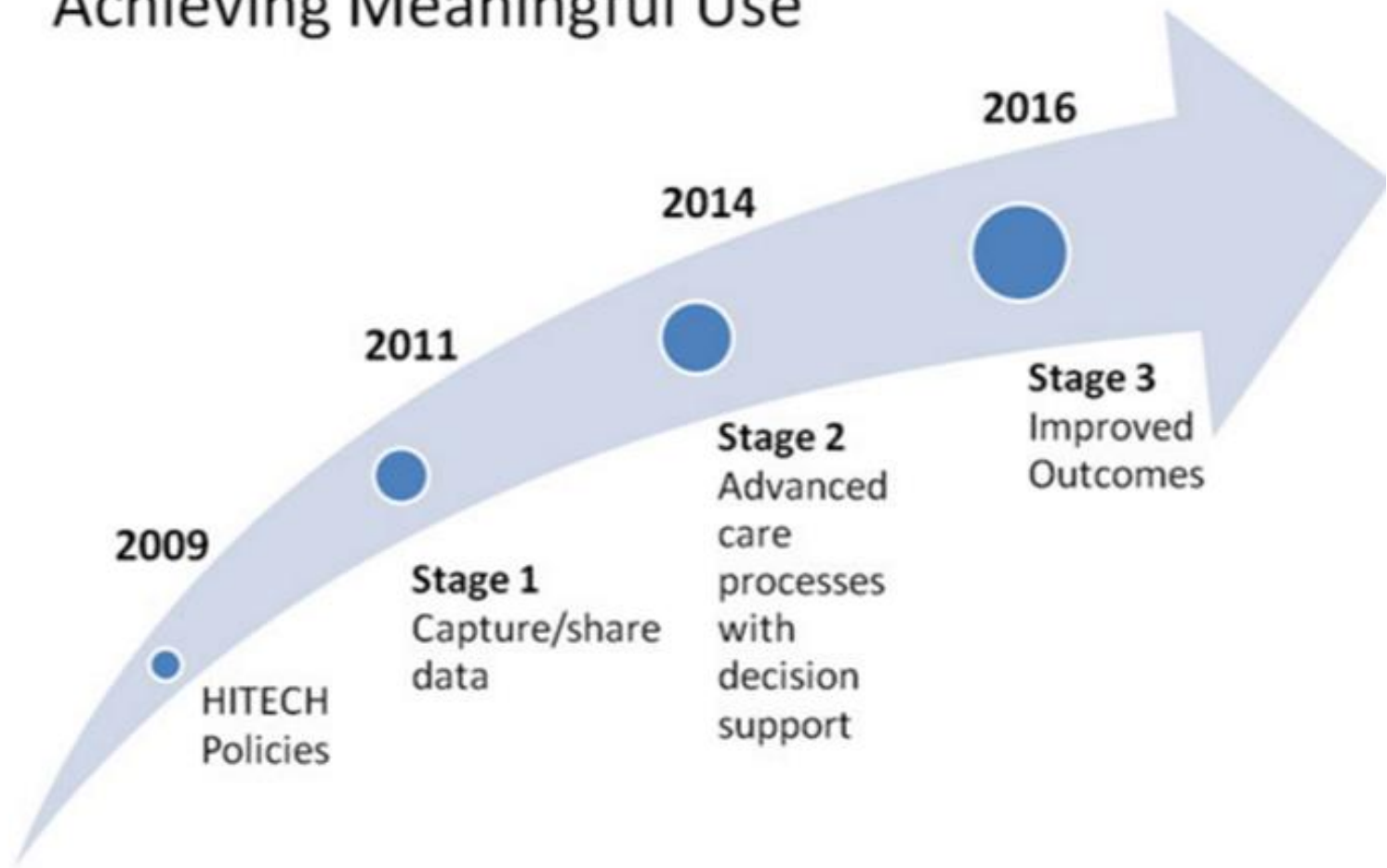
EHR Adoption Increase - EP



EHR Adoption Increase - Dentist



Achieving Meaningful Use



Meaningful Use Progression

- Dentists have largely remained in the Adopt, Implement, or Upgrade (AIU) stage
- 83% of hospitals and 60% of practices plan to achieve MU Stage 3
- 61% of hospitals and 23% of practices plan to report MU without receiving incentives

Respondent Findings

- Capturing accurate and complete patient information was perceived by all three respondent groups as the most agreeable benefit of Meaningful Use.
- Hospital and dental-practices responded more positively toward potential Meaningful Use benefits compared to practice respondents

Meaningful Use Greatest Perceived Challenges

- Hospital - meeting the required threshold for certain measures
- Practices - reduced productivity
- Dental- difficulty gathering necessary information and documentation for attestation

Help!

- Implementing clinical quality improvements
- Information sessions regarding attestation requirements/processes
- Assistance using information from the EHR to attest to MU

Health Information Exchange (HIE) Results

- Using HIE for exchanging patient health information remained low (rarely or never used HIE)
- Lack of support from EHR systems to utilize HIE mechanisms

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Summary

- Objectives of the study
- Sampling frame
- High level findings
- EHR Adoption

Environmental Scan

NEXT STEPS

SMHP Updates

- The Environmental Scan will be used to update the State Medicaid Health IT Plan (SMHP)
 - As-Is HIT Landscape
 - To-Be HIT Landscapes
 - State's HIT Roadmap

State Medicaid Agency

- SMA is tasked with managing HIT funding requests to CMS, maintaining the required CMS documents and providing updates to CMS

Health IT Funding

- [SMD 16-003](#) re: Availability of HITECH Administrative Matching Funds to Help Professionals and Hospitals Eligible for Medicaid EHR Incentive Payments Connect to Other Medicaid Providers
 - Opens opportunities to connect Medicaid providers
 - Carrie Ortega is collecting opportunity ideas

QUESTIONS?

Contact Information

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Reference: SMD 16-003

<https://www.medicaid.gov/federal-policy-guidance/downloads/SMD16003.pdf>